

# Request for Continued Examination (RCE) Transmittal

Address to:  
Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

|                        |                       |
|------------------------|-----------------------|
| Application Number     | 10/790,651            |
| Filing Date            | March 1, 2004         |
| First Named Inventor   | ZUCHERMAN, James F.   |
| Art Unit               | 3733                  |
| Examiner Name          | CUMBERLEDGE, Jerry L. |
| Attorney Docket Number | 19433A-000154US       |

**This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.**  
Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).

- a. ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
- i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
- ii. ☐ Other \_\_\_\_\_
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/ Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☒ Other Petition for Extension of Time

## 2. Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. ☐ Other \_\_\_\_\_

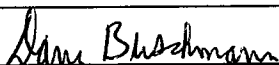
## 3. Fees

The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

- a. ☒ The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments, to Deposit Account No. 20-1430. I have enclosed a duplicate copy of this sheet.
- i. ☒ RCE fee required under 37 CFR 1.17(e) \$ 405.00
- ii. ☒ Extension of time fee (37 CFR 1.136 and 1.17) \$ 60.00
- iii. ☐ Other \_\_\_\_\_ \$ \_\_\_\_\_
- b. ☐ Check in the amount of \$ \_\_\_\_\_ enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed) for \$ \_\_\_\_\_

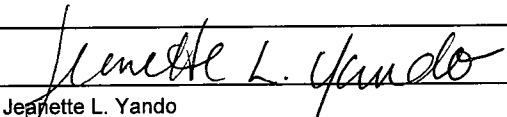
**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

|                    |   |                  |                  |
|--------------------|---|------------------|------------------|
| Signature          |  | Date             | October 31, 2007 |
| Name (Print /Type) | Dana Buschmann  | Registration No. | 54,567           |

## CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being filed via EFS-Web with the United States Patent and Trademark Office on the date shown below.

|                    |   |      |                  |
|--------------------|---|------|------------------|
| Signature          |  | Date | October 31, 2007 |
| Name (Print /Type) | Jeannette L. Yando  |      |                  |

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2007

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 465

### Complete if Known

|                      |                       |
|----------------------|-----------------------|
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### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES           |          | SEARCH FEES           |          | EXAMINATION FEES      |          | Fees Paid (\$) |
|------------------|-----------------------|----------|-----------------------|----------|-----------------------|----------|----------------|
|                  | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) |                |
| Utility          | 310                   | 155      | 510                   | 255      | 210                   | 105      |                |
| Design           | 210                   | 105      | 100                   | 50       | 130                   | 65       |                |
| Plant            | 210                   | 105      | 310                   | 155      | 160                   | 80       |                |
| Reissue          | 310                   | 155      | 510                   | 255      | 620                   | 310      |                |
| Provisional      | 210                   | 100      | 0                     | 0        | 0                     | 0        |                |

#### 2. EXCESS CLAIM FEES

##### Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| Small Entity Fee (\$) | Fee (\$) |
|-----------------------|----------|
| 50                    | 25       |
| 210                   | 105      |
| 370                   | 185      |

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|----------|---------------|
| -20 or HP =  | x            | =        |               |

| Multiple Dependent Claims Fee (\$) | Fee Paid (\$) |
|------------------------------------|---------------|
|                                    |               |

HP = highest number of total claims paid for, if greater than 20

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|---------------|--------------|----------|---------------|
| -3 or HP =    | x            | =        |               |

HP = highest number of independent claims paid for, if greater than 3

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 =      | / 50 =       | (round up to a whole number) x                   | =        |               |

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1-Month Extension of Time

Request for Continued Examination Transmittal

Fees Paid (\$)

\$ 60

\$405

**TOTAL FEES \$465**

#### SUBMITTED BY

|                   |                       |  |                        |
|-------------------|-----------------------|--|------------------------|
| Signature         | <i>Dana Buschmann</i> | Registration No. (Attorney/Agent) 54,567 | Telephone 202-481-9914 |
| Name (Print/Type) | Dana Buschmann        | Date                                     | October 31, 2007       |